FORM D Section

MAR 0 9 2009

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

( check if this is an amendment and name has changed, and indicate change.)

Washington, D.C. 20549

FORM D

Washington, DC 105

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6) AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APP	'ROVAL
OMB NUMBER: Expires: 1 Estimated average hours per response	

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	Date Received	
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Filing Under (Check box(es) that apply Type of Filing:   New Filing	7): Rule 504 Rule 505 Amendment	⊠ Rule 506 □	Section 4(6)	ULOE	
	A. BASIC IDENTIF	ICATION DATA			<del></del> -
1. Enter the information requested abo	out the issuer				<u>44 2</u> 7 200
Name of Issuer ( Check if this is a East Cherokee Station Inc.	n amendment and name has change	d, and indicate change.)		<u> </u>	SOMBEH
Address of Executive Offices c/o Phillips Edison & Company, Ltd		, City, State, Zip Code) ati, Ohio 45249	(513) 554-11		
Address of Principal Business Operation (if different from Executive Offices)	ons (Number and Street	, City, State, Zip Code)	Telephone N	umber (Including Area	a Code)
Brief Description of Business  Real Estate Investments					
	<del></del>		<u> </u>	0903511	3
Type of Business Organization					
Type of Business Organization  ☑ corporation ☐ business trust	☐ limited partnership, alread☐ limited partnership, to be f	•	other (pleas		

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those state that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated an the filing of a federal notice.

SEC 1972 (6-02) 1 of 8

#### A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
  Each promoter of the issuer, if the issuer has been organized within the past five years;
  Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
  - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
  - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if ind	lividual)	-			
Phillips Edison Shopping Cente					
Business or Residence Address	(Numb	er and Street, City, State, 2	Zip Code)		
c/o Phillips Edison & Company	, Ltd., 11501 Nort	hlake Drive, Cincinnati,	Ohio 45249		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if inc	lividual)			<u> </u>	
Phillips, Michael C.					
Business or Residence Address	(Numb	er and Street, City, State, 2	Zip Code)		
c/o Phillips Edison & Company	, Ltd., 11501 Nort	hlake Drive, Cincinnati,	Ohio 45249		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	■ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if inc	lividual)		,		
Edison, Jeffrey S.					
Business or Residence Address	(Numb	er and Street, City, State, 2	Zip Code)		
c/o Phillips Edison & Company	, Ltd., 11501 Nort	hlake Drive, Cincinnati,	Ohio 45249		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	■ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if inc	lividual)				
Addy, R. Mark					
Business or Residence Address	(Numb	er and Street, City, State, 2	Zip Code)		
c/o Phillips Edison & Company	. Ltd., 11501 Nort	thlake Drive, Cincinnati,	Ohio 45249		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	■ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if inc	dividual)				
Martz, Raymond D.					
Business or Residence Address	(Numb	er and Street, City, State, 2	Zip Code)		
c/o Phillips Edison & Company	, Ltd., 11501 Nort	thlake Drive, Cincinnati,	Ohio 45249		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if inc	dividual)				
Business or Residence Address	(Numb	er and Street, City, State,	Zip Code)		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if inc	dividual)				
Business or Residence Address	(Numb	er and Street, City, State,	Zip Code)		

				B. INFO	DRMATIO	N ABOUT	OFFERI	NG				
											es N	lo
1. Has the iss	uer sold, or	does the is	suer intend	to sell, to n	on accredit	ed investor	in this off	ering?				į.
			Ans	wer also in	Appendix, 0	Column 2, i	f filing und	er ULOE.				
2. What is the	e minimum	investment	that will be	e accepted t	rom any inc	dividual?			· · · · · · · · · · · · · · · · · · ·		\$ <u>500.00</u>	
											es N	lo
3. Does the o	ffering pen	nit joint ow	mership of	a single uni	t?	***************************************					<b>2</b> C	1
4. Enter the in remuneration agent of a bro persons to be Full Name (L.	for solicitat ker or deale listed are as	tion of purc er registered ssociated pe	hasers in co I with the S ersons of su	onnection w EC and/or	ith sales of with a state	securities i or states, li	n the offeri st the name	ng. If a per of the brok	son to be li: er or deale:	sted is an a . If more t	ssociated han five (	person or
			,									
Business or R	esidence A	ddress (Nu	mber and S	treet, City,	State, Zip C	ode)			•			
Name of Asso	nisted Dec	lean an Davi										
Name of ASSO	sciated Bro.	kei ui Deal	C1									
States in Whi											<del></del>	_
•	All States"	or check in									All States	
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	(MD)	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	(NC) (VA)	[ND] [WA]	(OH) [WV]	[OK] [W]]	[OR] [WY]	[PA] [PR]
[RJ] Full Name (L	[SC] ast name fi	[SD] rst, if indivi	[TN] idual)	[17]	[01]	(**)	(,,,,		[,,,]	1.55	<u>[ [ ] ] ] </u>	[1-1-1]
Business or R	esidence A	ddress (Nu	mber and S	treet, City,	State, Zip C	ode)						
Name of Asso	ociated Bro	ker or Deal	er					, <u></u>				
States in Whi												
•										_	All States	
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[[L]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO] [PA]
[MT]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[MM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	(OH) [WV]	[OK] [WI]	[OR] [WY]	[PR]
[RI]			<u> </u>	[1A]	[UI]	[ * ' ]	[VA]	[177]	[** * ]	[**1]	[***]	[117]
Full Name (L	ast name II	rst, ii indiv	iduai)									
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Business or R	tesidence A	ddress (Nu	mber and S	treet, City,	State, Zip C	(ode)						
Name of Asse	ociated Bro	ker or Deal	<u></u> ег									
States in Whi	ch Person l	Listed Has	Solicited or	Intends to	Solicit Purc	hasers						
	All States"							***************************************			All States	ī
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[N]]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

### C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.					
	Type of Security		egate ing Price			Already Sold
	Debt	\$ <u>0</u>			<u>s</u> c	)
	Equity	\$53,0	00.00		\$53,0	00.00
	□ Common □ Preferred					
	Convertible Securities (including warrants)	s	0		s	0
	Partnership Interests		0			0
	Other (Specify)		0			0
	Total		000.00			00.00
	Answer also in Appendix, Column 3, if filing under ULOE.					
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		umber vestors		Dolla	ggregate ar Amount Purchases
	Accredited Investors	_10	)6		\$ <u>53.</u> (	00.00
	Non-accredited Investors	_0			\$6	)
	Total (for Glings under Bula 504 only)				c	
	Total (for filings under Rule 504 only)				J	
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.					
	Type of offering		ype of œurity			ar Amount Sold
	Rule 505		·		<b>S</b>	
	Regulation A	_			<b>s</b>	
	Rule 504				\$	
	Total				<b>s</b>	
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.					
	Transfer Agent's Fees				s	
	Printing and Engraving Costs			Ф	<b>S</b>	
	Legal Fees			Ø	S <u>5,1</u>	66.00
	Accounting Fees	•••••			<b>S</b>	
	Engineering Fees				<b>S</b>	
	Sales Commissions (specify finders' fees separately)			0	<b>s</b>	
	Other Expenses (identify) Blue Sky Fees			Ø	\$ <u>2,3</u>	35.00
	Total			Ø	\$ <u>7,5</u>	01.00

	C. OFFERING PRICE	, NUMBER OF INVESTORS, EXPENSES AND USE	OFF	ROCEEDS		
	1 and total expenses furnished in response	e offering price given in response to Part C - Question to Part C - Question 4.a. This difference is the			9	6 <u>45,499.00</u>
	used for each of the purposes shown. If the a estimate and check the box to the left of the	ross proceeds to the issuer used or proposed to be amount for any purpose is not known, furnish an estimate. The total of the payments listed must equal forth in proposers of lend C. Ouestion 4 h above.				
	the adjusted gross proceeds to the issuer set i	forth in response to Part C - Question 4.b above.		Payments to Officers, Directors, & Affiliates	. I	Payments To Others
	Salaries and fees			\$		\$
	Purchase of real estate		0	\$		\$
	Purchase, rental or leasing and installation	on of machinery and equipment		\$		\$
	Construction or leasing of plant building	s and facilities		\$		\$
	offering that may be used in exchange for	ng the value of securities involved in this or the assets or securities of another	_	\$	п	\$
				\$	_	S
	* *			\$		\$45,499.00
				\$		\$
			_	<b>*</b>	_	<u> </u>
				\$	0	\$
				\$		\$ <u>45,499.00</u>
	Total Payments Listed (Column totals ac	dded)		⊠ \$ <u>4</u>	5,499	<u>00.00</u>
		D. FEDERAL SIGNATURE		<u> </u>		
Th	following signature constitutes an undertakir	ned by the undersigned duly authorized person. If this nong by the issuer to furnish to the U.S. Securities and Exclisiver to any non-accredited investor pursuant to paragra	iange C	Commission, up	on w	5, the ritten reques
lss	uer (Print or Type)	Signature		Date	1	
Εŧ	est Cherokee Station Inc.	4. mak add		3/5	0	9
N	ame of Signer (Print or Type)	Title of Signer (Print of Type)				
R.	Mark Addy	Vice President and Secretary				
	•	, ·				

- ATTENTION ---

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

